01/31/2008 13:07

Image# 28990223948

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIWI 3X	For Other Than A	An Authorized Comm	nittee	0	Office Use Only
NAME OF COMMITTEE (in full)	USE FEC MAILING L OR TYPE OR PRINT		ping, type		
American Dental Political A	ction Committee				
ADDRESS (number and street)	1111 14th Street, N	<b>\W</b>			
Check if different	Suite 1100				
than previously reported. (ACC)	Washington		L L	DC	20005
2. FEC IDENTIFICATION NU	MBER ₩	CITY A	S	ГАТЕД	ZIPCODE 🛕
C00000729		3. IS THIS REPORT	NEW (N) <b>OR</b>	X AMEN	NDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20	Year Only)  Dec 20 (M12)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep 20	(M9) (Non-Election Year Only)
April 15 Quarterly Report(	O1)	Apr 20 (M4)	Jul 20 (M7)	Oct 20	(M10) Jan 31 (YE)
July 15	(c) 12-Day	Primary (	(12P) General (12G) Runof		
Quarterly Report( October 15 Quarterly Report(	Report fo	or the: Convention	on (12C)	Special (120	3)
January 31 Quarterly Report(		Election on			in the State of
July 31 Mid-Year Report(Non-electi Year Only) (MY)	ion (d) 30-Day Post -El		30G)	Runoff (30R	Special (30S)
Termination Repo	ort Report to	Election on			in the State of
5. Covering Period 0	05 01 20	0 0 7 throug	yh 05	31 2	2007
I certify that I have examined this	Report and to the best	of my knowledge and belief	it is true, correct ar	nd complete.	
Type or Print Name of Treasurer	Dr Roger Triftsha	user			
Signature of Treasurer Electr	ronically Filed by Dr Ro	oger Triftshauser	Da	te 01	31 2008
NOTE : Submission of false, err	oneous, or incomplete in	formation may subject the p	erson signing this	Report to the pe	enalties of 2 U.S.C 437g.
Office Use					FEC FORM 3X

FE6AN026

FEC Form 3X (Rev. 02/2003)

## SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

OF RECEIPTS AND DISBURSEMENTS
Page 2

F	eport Covering the Period: From:	01 2007	To: 0 5 3 1 2 0 0 7
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
ô.	(a) Cash on Hand January 1 Ž00 $\overset{\vee}{7}$		406004.72
	(b) Cash on Hand at Begining of Reporting Period	627043.56	
	(c) Total Receipts (from Line 19)	63777.87	661040.20
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	690821.43	1067044.92
7.	Total Disbursements (from Line 31)	133160.43	509383.92
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	557661.00	557661.00
9.	Debts and Obligations owed TO the committee (Itemize all on	0.00	7
	Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

## For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Dental Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	8065.00	22965.00
(ii) Unitemized	50805.40	494318.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	58870.40	517283.74
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	58870.40	517283.74
Transfers From Affiliated/Other     Party Committees	4684.15	142786.47
3. All Loans Received	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	223.32	969.99
8. Transfers from Non-Federal and Levin Fund	ds	
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63777.87	661040.20
Total Federal Receipts     (subtract Line 18(c) from Line 19)	63777.87	661040.20

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	160.43	616.43
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	160.43	616.43
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to Federal Candidates/Committeesand Other Political Committees	133000.00	507600.00
١.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
ò.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Э.	Other Disbursements	0.00	1167.49
0.	Federal Election Activity (2 U.S.C 431(20))  (a) Shared Federal Election Activity  (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	133160.43	509383.92
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	133160.43	509383.92

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	58870.40	517283.74
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	58870.40	517283.74
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	160.43	616.43
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	160.43	616.43

FE6AN026

## SCHEDULE A (FEC Form 3X)

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 40 (check only one)    X
or for com	nation copied from such Reports and S mercial purposes, other than using the OF COMMITTEE (In Full) can Dental Political Action Comr	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Na	me (Last, First, Middle Initial) ard J Larson Address # B			Date of Receipt  0 5 0 1 2 0 0 7
City	887 W North Beach Ro	State	Zip Code	Transaction ID: 3896628
Bow		WA	98232	Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Name of self-en	of Employer nployed	Occupatio dentist	n	7
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	me (Last, First, Middle Initial) yne McMahan			Date of Receipt
	Address Alabama Dental Associated 836 Washington Street	t		05 01 7 2007
City		State	Zip Code	Transaction ID: 3896629
FEC ID	nomery  number of contributing political committee.	C	36104	Amount of Each Receipt this Period 500.00
Name o Alaban	of Employer na Dental Assoc	Occupatio Executive	n e Director	
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
	me (Last, First, Middle Initial) n A Malaker			Date of Receipt
Mailing	Address			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State MO	Zip Code	Transaction ID: 3896630  Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Name o	of Employer nployed	Occupatio dentist	n	
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOT	<b>AL</b> of Receipts This Page (optional)			1500.00

ITEMIZ	DULE A (FEC Form 3X) ZED RECEIPTS  nation copied from such Benorts and Sta	atements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 40 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  In for the purpose of soliciting contributions
or for com  NAME  Amer  Full Na  Dr Lana  Mailing  City	mercial purposes, other than using the r OF COMMITTEE (In Full) ican Dental Political Action Comm ame (Last, First, Middle Initial) a R Schlecht Address PO Box 247	name and addinittee	ress of any political committee to	Date of Receipt  0 5 0 1 2 0 0 7  Transaction ID: 3896636
Name self-en	O number of contributing political committee.  of Employer inployed  of For:  Primary	Occupation dentist Aggregate	58436-0247  Year-to-Date ▼  500.00	Amount of Each Receipt this Period  500.00
B. Dr Allar Mailing City W Bloom FEC II federal Name self- el	ame (Last, First, Middle Initial) n Jacobs 1 Address 4868 Fairway Rdg S  Domfield D number of contributing political committee.  of Employer mployed  at For: Primary General Other (specify)	State MI  C  Occupation dentist  Aggregate	Zip Code 48323-3314 Year-to-Date ▼	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 3896644  Amount of Each Receipt this Period  300.00
C. Dr Blar Mailing City Ladys FEC II federal Name self-en Receip	O number of contributing political committee.  of Employer nployed	State WI  C  Occupation dentist  Aggregate	Zip Code 54848-0408 Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3896645  Amount of Each Receipt this Period  500.00
SUBTOT	AL of Receipts This Page (optional)		·····	1300.00

TOTAL This Period (last page this line number only) ......

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 8 / 40   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Dental Political Action Co		area or any poniosa sommittee is	
Full Name (Last, First, Middle Initial) Dr Thomas Danner Pollard			Date of Receipt
Mailing Address 9138 NW McKenna	Dr		M M / D D / Y Y Y Y Y O D D / 2007
City Portland	State OR	Zip Code 97229-8038	Transaction ID: 3896648  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0,220 0000	500.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Michael C Griffiths			Date of Receipt
Mailing Address 1920 Irving St Ne			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State DC	Zip Code 20018-2430	Transaction ID: 3896649  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20010 2450	500.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Akram E Rafla			Date of Receipt
Mailing Address 60 Buckskin Dr			05 01 2007
City	State	Zip Code	Transaction ID: 3896650
Weston FEC ID number of contributing federal political committee.	C	02493-1130	Amount of Each Receipt this Period  500.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
			1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 40 (check only one)    X
Any or f	y information copied from such Reports and $\mathfrak S$ or commercial purposes, other than using the	Statements may ne name and addre	ot be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Dental Political Action Com	mittee		
	Full Name (Last, First, Middle Initial) Dr. Marta Rafla			Date of Receipt
	Mailing Address 250 Commercial Stree Suite 430		7in Oada	05 01 200051
	City Worcester	State MA	Zip Code 01608-1726	Transaction ID: 3896651  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01000-1720	250.00
	Name of Employer self-employed	Occupation dentist		
	Receipt For:  Primary General  Other (specify) ▼	+	ear-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr Jeffrey Ganeles			Date of Receipt
	Mailing Address 2365 NW 46th St			M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: 3896652
	Boca Raton	FL	33431-8425	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr Bradley S Trotter			Date of Receipt
	Mailing Address			05 01 YYYY 2007
	City	State VA	Zip Code	Transaction ID: 3896653  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	
	JBTOTAL of Receipts This Page (optional)	<u> </u>		1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 40 (check only one)    X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may re name and address	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Dental Political Action Com	ımittee		
۷.	Full Name (Last, First, Middle Initial) Dr Michael Parry Evans			Date of Receipt
	Mailing Address 1859 Loma Linda St			05 01 2007
	City Sarasota	State FL	Zip Code 34239-2206	Transaction ID: 3896654
	FEC ID number of contributing federal political committee.	C	34235-2200	Amount of Each Receipt this Period  25.00
	Name of Employer self-employed	Occupation dentist		
	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 225.00	
	Full Name (Last, First, Middle Initial) Dr John Floyd Harrington, Jr			Date of Receipt
	Mailing Address 274 Nelson Rd NW			05 02 2007
	City	State	Zip Code	Transaction ID: 3896707
	Milledgeville  FEC ID number of contributing federal political committee.	GA C	31061-9787	Amount of Each Receipt this Period 500.00
	Name of Employer self-employed	Occupation dentist		
	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Dr David C Averill			Date of Receipt
	Mailing Address 324 Pearl St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3897010
	Burlington FEC ID number of contributing federal political committee.	C	05401-8531	Amount of Each Receipt this Period  500.00
	Name of Employer self-employed	Occupation dentist		
	Receipt For:  Primary General  Other (specify) ▼	<del></del>	/ear-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			1025.00

## SCHEDULE A (FEC Form 3X)

	EDULE A (FEC Form 3X)  MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 40 (check only one)    X
or for o	formation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Dental Political Action Comr	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ma	I Name (Last, First, Middle Initial) Robert A Hersh illing Address 40 Woodstock Place	Chala	7'o Cada	Date of Receipt  0 5 0 7 2 0 0 7
Cit	y eehold	State NJ	Zip Code 07728-3144	Transaction ID: 3897014
FE	C ID number of contributing eral political committee.	C	0//26-3144	Amount of Each Receipt this Period  500.00
	me of Employer f-employed  ceipt For: Primary General Other (specify)	Occupation dentist  Aggregate	n Year-to-Date ▼ 500.00	1
. <u>Ms</u>	I Name (Last, First, Middle Initial) . Kathleen B. Ford iling Address 1111 14th Street, NW,	Suite 1100		Date of Receipt  0 5 0 7 2 0 0 7
Cit	у	State	Zip Code	Transaction ID: 3897017
<u>W</u>	ashington	DC	20005-5627	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		500.00
Am <u>on</u>	me of Employer nerican Dental Associati-	Occupatio PAC Dire	ector	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
	l Name (Last, First, Middle Initial) David S Wilbanks			Date of Receipt
Ma	iling Address			05 07 Y Y Y Y Y Y
Cit	у	State TX	Zip Code	Transaction ID: 3897021  Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		250.00
	me of Employer f-employed	Occupatio dentist		
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBT	FOTAL of Receipts This Page (optional)			1250.00

FOR LINE NUMBER: PAGE 12/40 **SCHEDULE A (FEC Form 3X)** Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Dental Political Action Committee Full Name (Last, First, Middle Initial) Dr Frederick T Philips, Jr Date of Receipt Mailing Address 05 21 2007 City State Zip Code Transaction ID: 3911323 TX Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. Name of Employer self-employed Occupation dentist Receipt For: Aggregate Year-to-Date Primary General 240.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	240.00
TOTAL This Period (last page this line number only)	<u> </u>	8065.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 40 (check only one)  11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Dental Political Action Commercial Political Action Commercial Political Action Commercia	e name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Tennessee Dental PAC  Mailing Address PO Box 120188 2104 Sunset Place  City  Nashville  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary Other (specify)	State Zip Code TN 37212  C  Occupation  Aggregate Year-to-Date ▼  23636.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) California Dental PAC Mailing Address PO Box 13749  City Sacramento  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code CA 95853  C  Occupation  Aggregate Year-to-Date ▼  33898.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial)  New Jersey Dental PAC  Mailing Address One Dental Plaza PO Box 6020  City  North Brunswick  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code NJ 08902  C  Occupation  Aggregate Year-to-Date   12810.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (optional)		2556.68

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 40 (check only one)  11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may rie name and addr	not be sold or used by any perse ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Dental Political Action Com	nmittee		
Α.	Full Name (Last, First, Middle Initial) New Jersey Dental PAC			Date of Receipt
	Mailing Address One Dental Plaza PO Box 6020			05 21 7 2007
	City	State	Zip Code	Transaction ID: 3911309
	North Brunswick FEC ID number of contributing	NJ	08902	Amount of Each Receipt this Period
	federal political committee.	C		120.00
	Name of Employer	Occupation		
	Receipt For:	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	12930.00	
В.	Full Name (Last, First, Middle Initial) Indiana Dental PAC	1		Date of Receipt
	Mailing Address PO Box 2467			05 21 2007
	City	State	Zip Code	Transaction ID: 3911315
	Indianapolis	IN	46206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer	Occupation		
	Receipt For:	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	11285.00	
C.	Full Name (Last, First, Middle Initial) California Dental PAC			Date of Receipt
	Mailing Address PO Box 13749			05 21 2007
	City	State	Zip Code	Transaction ID: 3911317
	Sacramento	CA	95853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1757.47
	Name of Employer	Occupation		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 35655.47	
		0 0		2007 47
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	2087.47
	TOTAL This Period (last page this line numbe	er only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 40
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)  11a
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	American Dental Political Action Commi	ttee		
	Full Name (Last, First, Middle Initial) Indiana Dental PAC			Date of Receipt
	Mailing Address PO Box 2467			05 21 2007
	City	State	Zip Code	Transaction ID: 3911325
	Indianapolis	IN	46206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer	Occupatio	n	
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼		e Year-to-Date ▼ 11325.00	

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	40.00
TOTAL This Period (last page this line number only)	<b>•</b>	4684.15

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 16 / 40
·		Use separate schedule(s) for each category of the	(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c 12
			13 14 15 16 X 17
Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Dental Political Action Com	mittee		
Full Name (Last, First, Middle Initial) Citibank 1			Date of Receipt
Mailing Address 1500 Vermont Ave Nw	1		05 31 2007
City	State	Zip Code	Transaction ID: 3921159
Washington	DC	20005	Amount of Each Receipt this Period
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SUBTOTAL of Receipts This Page (optional)	<b>•</b>	223.32
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# SCHEDULE B (FEC Form 3X)

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	Full Name (Last, First, Middle Initial) Searchlight Leadership Fund Committee			Transaction ID: 3896350 Date of Disbursement	
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American Dental Political Action Committee	Э													
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Detailed Summary Page	SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate so for each categor	ry of the (	(check only	- ´ -	PAGE 23 / 40
NAME OF COMMITTEE (In Full)  American Dental Political Action Committee  Full Name (Last, First, Middle Initial) Culberson For Congress  Mailing Address P.O. Box 41964  City State Zip Code TX 77241  Purpose of Disbursement Check sent to Dr. Tommy Harrison Candidate Name Rep. John Abney Culberson State: TX District: 07  Full Name (Last, First, Middle Initial) Andrews For Congress Committee  Mailing Address 215 Fourth Avenue Suite 200  City State Zip Code TX 77241  Transaction ID: 3897356 Date of Disbursement this Per Amount of Each Disbursement this Per Amount of Each Disbursement this Per State: TX District: 07  Full Name (Last, First, Middle Initial) Andrews For Congress Committee  Mailing Address 215 Fourth Avenue Suite 200  City State Zip Code NJ V V V V V V V V V V V V V V V V V V			, ,			
American Dental Political Action Committee  Full Name (Last, First, Middle Initial) Culberson For Congress  Mailing Address P.O. Box 41964  City State Zip Code TX 77241  Purpose of Disbursement check sent to Dr. Tommy Harrison Cardidate Name Rep. John Abney Culberson State: TX District: 07  Full Name (Last, First, Middle Initial) Andrews For Congress Committee  Mailing Address 215 Fourth Avenue Suite 200  City State Zip Code President NJ 08035  Transaction ID: 3897356 Date of Disbursement this Per  Amount of Each Disbursement this Per  Category' Type  Check sent to Dr. Tommy Harrison  Transaction ID: 3901088 Date of Disbursement this Per  Amount of Each Disbursement this Per  Category' Type  Check sent to Dr. Tommy  Check sent to Category' Type  Check sent to Dr. Peter  Check sent to						
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Senate President State: TX District: 07  Full Name (Last, First, Middle Initial) Andrews For Congress Committee  Mailing Address 215 Fourth Avenue Suite 200  City State Zip Code Haddon Heights NJ 08035  Purpose of Disbursement Jennifer Fisher to attend event/check sent to campaign  Candidate Name Rep. Robert E. Andrews  Office Sought: X House President Senate NJ District: 01  Full Name (Last, First, Middle Initial) Bartlett For Congress  Mailing Address PO Box 280 PO Box 3662  City State Zip Code State Zip Code (Specify) ▼  Transaction ID: 3901088  Disbursement For: 2008  X Primary General Other (specify) ▼  Jennifer Fisher to attend event/check sent to campaign  Transaction ID: 3901085  Date of Disbursement  Of 5 1 1 1 4 1 2 2 0 0 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
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# SCHEDULE B (FEC Form 3X)

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	Scott For Congress Committee					М	М	_	sburse			Y	γ Υ Υ	Υ	
	Mailing Address PO Box 261					0	5		1	<b>4</b>	l L	. 2	o ŏ 7	7	
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3.	Hoosiers Supporting Buyer For Congress								טו מס: burse		90109( ent	J			
	Mailing Address 200 North Main St. P.C	Roy 712				O <sup>M</sup>	5 <sup>M</sup>	/	<sup>D</sup> 1	<b>4</b>	/ Y	ž	ó o ŏ 7	7 <sup>Y</sup>	
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	City Monticello	State Zip Code IN 47960				Am	oun	t of	Each	Dis	sburser	mer	nt this I	Perio	bc
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		C Primary General				dox		3011	11 10 1	٦١.	riay ii	viac	<b>.</b>		
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_	Full Name (Last, First, Middle Initial)										901087	7			
Э.	Friends Of Dave Weldon							_	sburse				, , , ,	V.	
	Mailing Address 2525 Aurora Road Suite 2					O	5 <sup>M</sup>		<sup>D</sup> 1	4	] / [ ]	Ž	2 o ŏ 7	7 <sup>Y</sup>	
	City Melbourne	State Zip Code FL 32935				Am	oun	t of	Each	Dis	sburser	mer	nt this I	Perio	od
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American Dental Political Action Committ	ee											
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Mailing Address PO Box 1663						0.5	_		1 /	L.	ž 0 ŏ	/
City Tacoma	State WA	Zip Code 98401				Amou	nt of	f Each	n Disl	burseme	ent this	Peri
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Committee For Pete V. Domenici						Date o		isburs	eme	10820 nt		
Mailing Address PO Box 93656					$\dashv$	0 <sup>M</sup> 5	M	/ D	1 7	/ Y	ž 0 ŏ	7 <sup>Y</sup>
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Full Name (Last, First, Middle Initial) Enzi For U.S. Senate Committee						Trans Date o		isburs	eme			
Mailing Address PO Box 2775					$\exists$	o <sup>M</sup> 5	M	/ D	1 7	/ Y	ž 0 ŏ	7
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# SCHEDULE B (FEC Form 3X)

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	y Information copied from such Reports and Sta for commercial purposes, other than using the n												
Ν	NAME OF COMMITTEE (In Full)												
V	American Dental Political Action Comm	ttee											
	Full Name (Last, First, Middle Initial) Lindsey Graham for U.S. Senate					Trans					6		
						Date of	М		P 7	/ Y	ž	0 ŏ 7	Υ
	City Seneca	State Zip Code SC 29679				Amou	nt of	Each	n Dist	ourse	ment	this P	eriod
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	Candidate Name Lindsey Graham				ory/								
	Office Sought:  X House Disbut Senate President	rsement For: 2007 Primary X General Other (specify)	1	1 90		Warn	er C	Classi	c 20	07			
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	Full Name (Last, First, Middle Initial) Tim Johnson For South Dakota, Inc.					Trans Date	of Di	sburs	emen				
	Mailing Address PO Box 1859					0 <sup>M</sup> 5	M	<sup>D</sup> 1	7	/ L	ž	0 ŏ 7	Y
	City Sioux Falls	State Zip Code SD 57101				Amou	nt of	Each	n Dist	ourse	-	this P	-
	Purpose of Disbursement Judy Sherman attended event/check sent to ca	mpaign		01	1			•			10	00.00	)
	Candidate Name Tim Johnson			ateg Typ	jory/ e								
	X Senate President	rsement For: 2008  X Primary General Other (specify) ▼	1			Judy on the state of the state	She eck :	rmar sent t	atte to ca	ende ampa	d ev aign	e-	
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	Friends Of Senator Carl Levin					Date	of Di			nt		V *	V
	Mailing Address 10 G Street Ne, Suite	470				0 5		1	7	Ĺ	2	0 ŏ 7	
	City Washington	State Zip Code DC 20002				Amou	nt of	Each	Dist	ourse	ment	this P	eriod
	Purpose of Disbursement check sent to Kris Nicholoff-will attend MI even		Г	01	1	L.					10	00.00	)
	Candidate Name Sen. Carl Levin			i	jory/								
	Office Sought:  House  X Senate  President	rsement For: 2008  X Primary General Other (specify)	1	719		check off-wi	ser Il at	nt to l tend	Kris MI e	Nich vent	ol-		
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	E NUMBER: PAGE 28/40
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or for commercial purposes, other than using the name	and address of any political	committee to s	solicit contributions from such committee
NAME OF COMMITTEE (In Full)			
American Dental Political Action Committee	9		
Full Name (Last, First, Middle Initial)			Transaction ID: 3910815
Senator John Warner Cmte			Date of Disbursement
Mailing Address PO Box 3536			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	State Zip Code VA 22116		Amount of Each Disbursement this Period
Purpose of Disbursement			3000.00
Warner Classic 2007		011	
Candidate Name John Warner		Category/ Type	
Office Sought:    House   Disburser   X	nent For: 2008 Primary General Other (specify)		Warner Classic 2007
State: VA District:			
Full Name (Last, First, Middle Initial) Heather Wilson For Congress			Transaction ID: 3910807 Date of Disbursement
Mailing Address P.O. Box 14070			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
,	State Zip Code		Amount of Each Disbursement this Period
	NM 87191		1000.00
Purpose of Disbursement Katie Yehl attended event/check sent to campaign		011	1000.00
Candidate Name Rep. Heather A. Wilson		Category/ Type	
Office Sought:  X House Senate President  State: NM District: 01	nent For: 2008 Primary General Other (specify)		Katie Yehl attended event- /check sent to campaign
Full Name (Last, First, Middle Initial)			_ ,, ,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Committee For Thad Cochran			Transaction ID: 3910817 Date of Disbursement
Mailing Address PO Box 7183			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	State Zip Code MS 38801		Amount of Each Disbursement this Period
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Candidate Name Thad Cochran		Category/	
Office Sought: House Disburser	ment For: 2008	Type	-
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American Dental Political Action Committe	е											
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Chambliss For Senate							of Disb					_
Mailing Address Post Office Box 12469						0 <sup>M</sup> 5	M /	<sup>D</sup> 1	7	ž	0 ŏ 7	, <sup>Y</sup>
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Full Name (Last, First, Middle Initial)					Η,	T			201000	4		
Pat Roberts For Senate						Date o	action of Disb	urse			V	V
Mailing Address PO Box 433						0 <sup>M</sup> 5	/	<sup>D</sup> 1	7 ' [	2	0 ŏ 7	
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Full Name (Last, First, Middle Initial) Thelma Drake For Congress							action of Disb		391080 ment	3		
Mailing Address P.O. Box 61480						0 <sup>M</sup> 5	M /	<sup>D</sup> 1	7 /	ž	0 ŏ 7	, <sup>Y</sup>
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Purpose of Disbursement check sent to Dr. Terry Dickinson			01 <sup>-</sup>	1		<u> </u>				2	500.0	0
Candidate Name Rep. Thelma D. Drake			ateg Typ	ory/ e								
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Washington  Purpose of Disbursement Katie Yehl attended event/check to PAC  Candidate Name  Office Sought:  House Senate Primary Other (specify)  State:  District:  Full Name (Last, First, Middle Initial) Eric PAC  Mailing Address  2500.00  Katie Yehl attended event-/check to PAC  Katie Yehl attended event-/check to PAC  Transaction ID: 3910808 Date of Disbursement  M 5 M / D 1 D / Y 2 0 0 7 Y	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 30 / 40
NAME OF COMMITTEE (In Full)  NAME OF COMMITT	TEMIZED DISBURSEMENTS		21b	
NAME OF COMMITTEE (In Full) American Dental Political Action Committee  Full Name (Last, First, Middle Initial) Ameripac  Mailing Address				
Mailing Address 499 South Capitol, SW Suite 414  City Suite 414  City Suite 414  City Washington DC 20003  Purpose of Disbursement Kate Yehl attended event/check to PAC Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code Disbursement For: Senate Primary General Other (specify) ▼  City State Zip Code DC 20003  Purpose of Disbursement For: Senate Primary General Other (specify) ▼  City State Zip Code DC 20003  Purpose of Disbursement Mike Graham attended event/check sent to PAC Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code Disbursement this Perior Senate Other (specify) ▼  City Senate Primary General Other (specify) ▼  City State Zip Code MN 55128  Mailing Address 7300 Hudson Blvd Suite 270a  City State Zip Code MN 55128  Mailing Address 7300 Hudson Blvd Suite 270a  City State Zip Code MN 55128  Mailing Address 7300 Hudson Blvd Suite 270a  City Senate Primary General Other (specify) ▼  Category' Type  Category' Type  Amount of Each Disbursement this Perior Zenate Other (specify) ▼  Category' Type  Category' Typ	NAME OF COMMITTEE (In Full)	· ·	r committee to so	ion communicies from such committee
City Washington DC 20003  Purpose of Disbursement Kate Vehi attended event/check to PAC  Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial)  Candidate Name  Office Sought: House Disbursement For: Senate President Disbursement For: Senate President District:  Full Name (Last, First, Middle Initial)  Candidate Name  Office Sought: House Disbursement For: Senate President Disbursement For: Senate Disbursement This Period Disbursement Disbursement Disbursement Disbursement Disbursement For: Senate Primary General Disbursement Disbursement Disbursement Disbursement Disbursement For: Senate Disbursement For: Senate Disbursement Disbursem	,			
Purpose of Disbursement Katle Yehl attended event/check to PAC Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Eric PAC  Malling Address 209 Pennsylvania Avenue, SE  City Washington  Office Sought: House Disbursement For: Senate President  Office Sought: House Disbursement For: Disbursement For: Senate President  Office Sought: House Disbursement  Office Sought: House Disbursement For: Senate President  State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Office Sought: House Disbursement For: Senate President  State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Office Sought: House Disbursement For: Senate President  State: District:  Full Name (Last, First, Middle Initial)  Coleman For Senate 08  Mailing Address 7300 Hudson Bivd Suite 270a  City State Zip Code St Paul Mn 55128  Purpose of Disbursement  Candidate Name  Sen. Norm Coleman  Office Sought: House Senate Disbursement  Candidate Name  Sen. Norm Coleman  Office Sought: House Norm Coleman  Office Sought: President  State: Disbursement  Office Sought: Other (specify) ▼  Senate President  Norm Coleman  Office Sought: Other (specify) ▼				$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix} $
Ratie Vehl attended event/check to PAC Candidate Name  Office Sought: House Senate Primary General Primary General Office Sought: District:  Full Name (Last, First, Middle Initial) Eric PAC  City Washington DC 20003  Purpose of Disbursement Mike Graham attended event/check sent to PAC Candidate Name  Office Sought: House Primary General Office Sought: President State: Disbursement For: Senate Primary General Office Sought: President State: Disbursement For: Senate Primary General Office Sought: District:  Full Name (Last, First, Middle Initial) Coleman For Senate 08  Mailing Address 7300 Hudson Blvd Suite 270a  City State: Disbursement Office Sought: House Mailing Address 7300 Hudson Blvd Suite 270a  City State: Disbursement Office Sought: House Primary General Office Sought: House MN 55128  Mailing Address 7300 Hudson Blvd Suite 270a  City State: Disbursement Office Sought: House President State: Disbursement For: 2008 X Primary General Office Sought: House President State: Disbursement For: 2008 X Primary General Office Sought: House President State: Disbursement For: 2008 X Primary General Office Sought: House President State: Disbursement For: 2008 X Primary General President State: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District: Disbursement For: 2008 X Primary General President State: MN District:	Washington			Amount of Each Disbursement this Period
Office Sought: House Senate Primary General Other (specify) ▼  State: District: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Eric PAC  Mailing Address 209 Pennsylvania Avenue, SE  City State Zip Code Washington DC 20003  Purpose of Disbursement Mike Graham attended event/check sent to PAC  Candidate Name Disbursement Primary General Primary General President Other (specify) ▼  Mike Graham attended event/check sent to PAC  Candidate Name Disbursement Primary General Primary General Other (specify) ▼  Transaction ID: 3910808  Date of Disbursement this Period Disbursement this Period Disbursement this Period Disbursement this Period Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: 3910822  Date of Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement This Period Disbursement This Period Disbursement  Disbursement Disbursement  Disbursement Disbursement This Period Disbursement This Period Disbursement  Disbursement Disbursement Disbursement This Period Disbursement Disburs	Katie Yehl attended event/check to PAC			2300.00
Full Name (Last, First, Middle Initial)  Eric PAC  Mailing Address 209 Pennsylvania Avenue, SE  City Washington DC 20003  Purpose of Disbursement Mike Graham attended event/check sent to PAC  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Coleman For Senate 08  Mailing Address 7300 Hudson Blvd Suite 270a  City St Paul Mn 55128  Purpose of Disbursement  Mike Graham attended event/check sent to PAC  City St Paul Mn 55128  Purpose of Disbursement  Candidate Name  Sen. Norm Coleman  Office Sought: House X Senate President State: Disbursement For: 2008  X Senate Purpose of Disbursement  Candidate Name Sen. Norm Coleman  Office Sought: House X Senate President Sen. Norm Coleman  Office Sought: House X Senate President Candidate Name Sen. Norm Coleman  Office Sought: House X Senate President Candidate Name Sen. Norm Coleman  Office Sought: House X Senate President Cother (specify) ▼  Other (specify) ▼  Amount of Each Disbursement this Period Category/ Type  Amount of Each Disbursement this Period Category/ Type  Amount of Each Disbursement this Period Category/ Type  Other (specify) ▼  Amount of Each Disbursement this Period Category/ Type  Amount of Each Disbursement this Period Category/ Type  Other (specify) ▼	Senate President	Primary General		Katie Yehl attended event- /check to PAC
City Washington DC 20003  Purpose of Disbursement Mike Graham attended event/check sent to PAC  Candidate Name  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Coleman For Senate 08  Mailling Address 7300 Hudson Blvd Suite 270a  City State Zip Code St Paul MN 55128  Purpose of Disbursement  Candidate Name Sen. Norm Coleman  Office Sought: House Disbursement For: 2008 X Primary General Other (specify) ▼  Amount of Each Disbursement this Period Mike Graham attended even-tycheck sent to PAC  Transaction ID: 3910822  Date of Disbursement  0 11	Full Name (Last, First, Middle Initial)			Date of Disbursement
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Mike Graham attended event/check sent to PAC Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Coleman For Senate 08  Mailing Address 7300 Hudson Blvd Suite 270a  City State Zip Code MN 55128  Purpose of Disbursement State Name Sen. Norm Coleman  Office Sought: House X Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period Nother (specify) ▼  State: MN District:   Amount of Each Disbursement this Period State: MN District:   Amount of Each Disbursement State: MN District:   Amount of Each Disbu				Amount of Each Disbursement this Period
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Coleman For Senate 08  Mailing Address 7300 Hudson Blvd Suite 270a  City State Zip Code St Paul MN 55128  Purpose of Disbursement  Candidate Name Sen. Norm Coleman  Office Sought: House President President State: MN District:  Date of Disbursement  Amount of Each Disbursement this Period Category/ Type  Category/ Type  Other (specify) ▼  State: MN District:	Senate President	Primary General	Туре	Mike Graham attended even- t/check sent to PAC
City State Zip Code St Paul MN 55128  Purpose of Disbursement  Candidate Name Sen. Norm Coleman  Office Sought: House X Senate President President  State: MN District:  Disbursement For: 2008 X Primary General Other (specify) ▼  State: MN District:				Date of Disbursement
St Paul MN 55128  Purpose of Disbursement  Candidate Name Sen. Norm Coleman  Office Sought: House X Senate President President  State: MN District:  MN 55128  1000.00  O11 Category/ Type  Other (specify)   Other (specify)	Mailing Address 7300 Hudson Blvd Suite	270a		05 7 17 7 2007
Candidate Name Sen. Norm Coleman  Office Sought:  House X Senate President President  State: MN  District:  O11  Category/ Type  Oisbursement For: 2008 X Primary General Other (specify)  Total				Amount of Each Disbursement this Period
Sen. Norm Coleman  Office Sought: House X Senate President State: MN District:  Disbursement For: 2008 X Primary General Other (specify) ▼			011	1000.00
X Senate President Other (specify) ▼  State: MN District:  X Primary General Other (specify) ▼				
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SUBTOTAL OF Dispursements This Page (optional)	<u>'</u>			8500.00
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	CHEDULE B (FEC Fo	-	Use sepa	arate schedule(s)		FOR LINE		R:		PAG	E 31/	40	_
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	y Information copied from such Re or commercial purposes, other tha												
>	NAME OF COMMITTEE (In Full) American Dental Political Ac		ee	•									
	Full Name (Last, First, Middle Init Mike Pence Committee	ial)						action ID		103			
	Mailing Address P. O. Box	408					0 5	M / D.	18	Υ	žoŏ	7 <sup>Y</sup>	
	City Anderson		State IN	Zip Code 46015			Amou	nt of Each	n Disbu	rsem	ent this	Perio	bd
	Purpose of Disbursement check sent to Dr. Ray Maddox Candidate Name					011	<u> </u>				2500.0	00	
	Rep. Michael R. Pence	Laci				tegory/ Γype	-						
	Office Sought:  X House Senate President State: IN District: 06		ement For: Primary Other (spe	2008 General			check dox	sent to	Dr. Ra	ay M	ad-		
	Full Name (Last, First, Middle Init Rely on Your Beliefs Fund	ial)						action ID of Disburs		105			
	Mailing Address 209 Penns	ylvania Ave, S	SE				0 <sup>M</sup> 5	M / D.	18	Υ	žoŏ	7 <sup>Y</sup>	
	City Washington		State DC	Zip Code 20003			Amou	nt of Each	n Disbu	rsem	ent this	Peric	bd
	Purpose of Disbursement Mike Graham attended event/chec	ck sent to PAC				011	<u> </u>				2500.0	00	
	Candidate Name					tegory/ Γype							
	Office Sought:  House Senate President State:  District:	Disburse	ement For: Primary Other (spe	General ecify) ▼			Mike ( t/chec	Graham k sent to	attend PAC	ded e	even-		
	Full Name (Last, First, Middle Init Alliance for The West	ial)						action ID		104			
	Mailing Address 1006 Pend	lleton Street					0 <sup>M</sup> 5	M / D.	18	Υ	žoŏ	7 <sup>Y</sup>	
	City Alexandria		State VA	Zip Code 22314			Amou	nt of Each	n Disbu	rsem	ent this	Perio	od
	Purpose of Disbursement Judy Sherman attended event/che	eck sent to PAC				011	L.				1000.0	00	
	Candidate Name				Са	tegory/ Γype							
	Office Sought:  House Senate President State:  District:	Disburse	ement For: Primary Other (spe	General ecify) ▼			Judy S nt/che	Shermar ck sent	n atten to PA	ided C	eve-		
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) (check	INE NUMBER: PAGE 32 / 40 only one)
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NAME OF COMMITTEE (In Full)	and and address of any pointed committee t	0 00.000 00.000.0000.0000.0000.0000
American Dental Political Action Comm	ttee	
Full Name (Last, First, Middle Initial)		Transaction ID: 3911432
Tiberi For Congress		Date of Disbursement
Mailing Address 2021 E Dublin Granvil Suite 2000	e Road	$ \begin{array}{c c}  & \text{M} & M$
City Columbus	State Zip Code OH 43229	Amount of Each Disbursement this Perio
Purpose of Disbursement	10229	3000.00
check sent to Dr. Dennis Burns-June 1st Ohio	VII.	
Candidate Name Rep. Patrick J. Tiberi	Category/ Type	
Senate	rsement For: 2008  X Primary General	check sent to Dr. Dennis Burns-June 1st Ohio event
State: OH District: 12	Other (specify)	
Full Name (Last, First, Middle Initial)		Transaction ID: 3911582
Keller For Congress		Date of Disbursement
Mailing Address P.O. Box 1453		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Orlando	State Zip Code FL 32802	Amount of Each Disbursement this Perio
Purpose of Disbursement Jennifer Fisher attended event/check sent to ca	mpaign 011	1000.00
Candidate Name Rep. Richard A. Keller	Category/ Type	
Senate President	rsement For: 2008  X Primary General Other (specify)	Jennifer Fisher attended event/check sent to campaign
State: FL District: 08  Full Name (Last, First, Middle Initial)		Turney ID 0044500
Maloney For Congress		Transaction ID: 3911580 Date of Disbursement
Mailing Address 49 East 92nd Street		05 7 23 7 2007
City New York	State Zip Code NY 10128	Amount of Each Disbursement this Perio
Purpose of Disbursement Jennifer Fisher attended event/check sent to ca		1000.00
Candidate Name Rep. Carolyn B. Maloney	Category/ Type	
	rsement For: 2008  X Primary General Other (specify)	Jennifer Fisher attended event/check sent to campaign
State: NY District: 14		
		5000.00

В.

CHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBE	ER:		PAC	GE 33/	40	
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	ly one) 22 28a	X 23 28b	, П	24 28c	25 29		26 30b
ny Information copied from such Reports and Statem										
for commercial purposes, other than using the name	and address of any political co	ommitte	e to s	DIICIT CONT	ributions	from s	ucn co	mmittee		
NAME OF COMMITTEE (In Full) American Dental Political Action Committee	е									
Full Name (Last, First, Middle Initial)					saction I					
David Scott For Congress				Date 0 5	of Disbu	2 3	nt / Y	YYY	_ Y	
Mailing Address 162 Hurt Street Ne				0.5		23		žoŏ	/	
City Atlanta	State Zip Code GA 30307			Amo	unt of Ead	ch Disl	oursem	ent this	Perio	d
Purpose of Disbursement	<u> </u>							5000.0	00	
check sent to Dr. Gordon Austin		011							-	
Candidate Name Rep. David A. Scott		Categor Type	•							
, , , , , , , , , , , , , , , , , , ,	ment For: 2008 Primary General Other (specify)			checl Austi	k sent to n	Dr. (	Gordo	n		
Full Name (Last, First, Middle Initial)					saction I					
Pete Sessions For Congress 2008				Date	of Disbu		nt	V V	V	
Mailing Address Post Office Box 38585				0 5	W / L	23		žoŏ	7 '	
,	State Zip Code TX 75238			Amou	unt of Ead	ch Disl	oursem	ent this	Perio	d
Purpose of Disbursement Mike Graham attended event/check sent to campa	Г	011						1000.0	00	
Candidate Name Rep. Pete Sessions		Categor Type								
	ment For: 2008 Primary General Other (specify)	, Ji			Grahan ck sent					
Full Name (Last, First, Middle Initial)				Trans	saction I	<b>D</b> • 30	11570			
Kenny Marchant For Congress				Date	of Disbu	rsemer				
Mailing Address PO Box 110187				0 <sup>M</sup> 5	М / L	23	/ L	200	7 1	
	State Zip Code			Amou	unt of Ead	ch Disl	oursem	ent this	Perio	d
Carrollton Purpose of Disbursement	TX 75011			-				1000.0	00	$\neg$
Jennifer Fisher attended event/check sent to camp	aign	011			-					_
Candidate Name Rep. Kenneth Marchant		Categor Type								
X	ment For: 2008 Primary General Other (specify)				ifer Fish :/check					
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# SCHEDULE B (FEC Form 3X)

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	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam											
$\setminus$	NAME OF COMMITTEE (In Full)											
$ \rangle$	American Dental Political Action Committee	e										
<u></u>	Full Name (Last, First, Middle Initial)				Trans					3		
	Blue Dog PAC  Mailing Address 236 Massachusetts Ave.	NE			Date of	M /		emen 2 3	/ Y	ž	0 ŏ 7	Υ
	Ste 508				-							
	City Washington	State Zip Code DC 20002			Amou	nt of	f Each	Dist	urser	-	this P	
	Purpose of Disbursement Katie Yehl will attend event/check sent to PAC	Γ	0	11		-	_			50	00.00	)
	Candidate Name		Cate	egory/ /pe								
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)			Katie ent/ch					V-		
_	Full Name (Last, First, Middle Initial)				T	4!	ID	. 201	1570			
	Friends of Mazie Hirono				Trans Date of		sburs	emen			Y	Υ
	Mailing Address PO Box 677				0 5		2	23	Ĺ	2	0 ŏ 7	
	City Honolulu	State Zip Code HI 96809		Amount of Each Disbursement this Perio						-		
	Purpose of Disbursement Jennifer Fisher attended event/check sent to camp	aign	0	11		-	•		_	10	00.00	)
	Candidate Name Mazie Hirono			egory/ /pe								
	X III	ment For: 2008 Primary General Other (specify)			Jennit event ign						-	
_	Full Name (Last, First, Middle Initial)				Trans	acti	on ID	: 391	1584	1		
	Majority In Congress PAC					of Di			t / Y	Y	Y	Υ
	Mailing Address				0 5		2	23	L	2	0 ŏ 7	
	City	State Zip Code			Amou	nt of	f Each	Dist	urser	nent	this P	eriod
	Purpose of Disbursement Jennifer Fisher attended event/check sent to camp	paign	0	11	L.	_				10	00.00	)
	Candidate Name			egory/ /pe								
	Senate President	ment For: Primary General Other (specify)			Jennit event/ ign						-	
Г	State: District:					_						
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22   X 23   24   25   26   28a   28b   28c   29   30
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) American Dental Political Action Committee		minutee to son	on contributions from such committee
Full Name (Last, First, Middle Initial) Solidarity PAC			Transaction ID: 3911581 Date of Disbursement
Mailing Address 301 4th Street, NE			$ \begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} $ $ \begin{bmatrix} 0.5 & M \\ 0.5$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Jennifer Fisher attended event/check sent to camp Candidate Name	L	011 Category/	1000.00
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Type	Jennifer Fisher attended event/check sent to campa- ign
Full Name (Last, First, Middle Initial) Committee For Daniel K. Akaka			Transaction ID: 3911858  Date of Disbursement
Mailing Address 3125 Kaohinani Drive			$\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} \begin{smallmatrix} A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 0 \end{smallmatrix} \begin{smallmatrix} Y \end{smallmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \\ 0 \end{smallmatrix} \begin{smallmatrix} Y \end{smallmatrix}$
City Honolulu	State Zip Code HI 96817		Amount of Each Disbursement this Period
Purpose of Disbursement check sent to Dr. Gary Yonemoto Candidate Name Daniel Akaka		011 Category/ Type	2000.00
• -	ement For: 2008 Primary General Other (specify)	1,750	check sent to Dr. Gary Yo- nemoto
Full Name (Last, First, Middle Initial) Andrews For Congress Committee			Transaction ID: 3911859 Date of Disbursement
Mailing Address 215 Fourth Avenue Suite 200			$ \begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.2 & 4 \\ 0.2 & 4 \end{bmatrix} \begin{bmatrix} 0.2 & 4 \\ 0.2 & 0.0 & 7 \end{bmatrix} $
City Haddon Heights	State Zip Code NJ 08035		Amount of Each Disbursement this Period
Purpose of Disbursement check sent to Dr. Vincent C. Mayher		011	2500.00
Candidate Name Rep. Robert E. Andrews		Category/ Type	
5 X	ement For: 2008 Primary General Other (specify)		check sent to Dr. Vincent C. Mayher
SUBTOTAL of Disbursements This Page (optional)			5500.00
TOTAL This Period (last page this line number only)			

CHEDULE B (FEC Form 3X)	Use separate schedule(s	)	FOR LINI	INE NUMBER: PAGE					36 / 40	40		
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	n category of the				23 28b	24 25 28c 25					
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NAME OF COMMITTEE (In Full)	ic and address of any political	u con		Olicit Coriti	ibutic	7113 110	111 3001	1 001111	TIILLOC			
American Dental Political Action Committ	ee											
Full Name (Last, First, Middle Initial) Brian Baird For Congress				Transaction ID: 3911845 Date of Disbursement								
				0 <sup>M</sup> 5		<sup>D</sup> 2		Y	0 ŏ 7	7 Y		
Mailing Address PO Box 5016				0.5			4		. 0 0 7			
City Vancouver	State Zip Code WA 98668			Amou	nt of	Each I	Disbur		t this F			
Purpose of Disbursement			1					1	500.0	0		
Jennifer Fisher attended event/check sent to cam Candidate Name	paign	-	011 ategory/									
Rep. Brian Baird			Type									
§ X	ement For: 2008 Primary General	'		Jennif event/					a-			
President State: WA District: 03	Other (specify)			ign				·				
Full Name (Last, First, Middle Initial)				Trans	actio	n ID.	20110	2//				
Steve Rothman For New Jersey Inc.						burse		<del>, 1 1</del>				
Mailing Address P.O. Box 714				0 <sup>M</sup> 5	M /	<sup>D</sup> 2	<sup>D</sup> /	Y 2	0 ŏ 7	7 <sup>Y</sup>		
City	State Zip Code			Amou	nt of	Each I	Disbur	semen	nt this F	Perio		
Hackensack	NJ 07602					•		1	000.0	n		
Purpose of Disbursement Judy Sherman attended event/check sent to camp	paign		011		0			1	000.0	10		
Candidate Name Rep. Steven R. Rothman		C	ategory/ Type									
Senate	ement For: 2008 Primary General	!		Judy Sherman attended eve- nt/check sent to campaign								
State: NJ District: 09	Other (specify) ▼											
Full Name (Last, First, Middle Initial) Mike Rogers For Congress				Trans Date o		n ID:		357				
Mailing Address 123 East 13th Street				0 <sup>M</sup> 5	M /	<sup>D</sup> 2	<b>4</b> /	ÝŽ	0 ŏ 7	7 <sup>Y</sup>		
City Anniston	State Zip Code AL 36201			Amount of Each Disbursement this Perio								
Purpose of Disbursement check sent to Wayne McMahan	00201		011	1000.0						0		
Candidate Name Rep. Michael D. Rogers		C	ategory/ Type									
Senate	ement For: 2008 Primary General	•		check an	sen	t to V	Vayne	McN	lah-			
State: AL District: 03	Other (specify) ▼											
l							-		105.5			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s		DR LINE NUMBER: PAGE 3									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30								
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NAME OF COMMITTEE (In Full)  American Dental Political Action Committee	,											
Full Name (Last, First, Middle Initial)  Mccrery For Congress Committee			Transaction ID: 3									
Mailing Address Post Office Box 52956 333 Texas Street Suite	1900		Date of Disbursement    M 5   M   / D 2   D   / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City Shreveport	State Zip Code LA 71135		Amount of Each [	Disbursement this Period								
Purpose of Disbursement Check Sent to Gary Roberts		011	L	5000.00								
Candidate Name Rep. Jim McCrery		Category/ Type										
Senate President	ement For: 2008 Primary General Other (specify)		Check Sent to Gary Roberts									
State: LA District: 04  Full Name (Last, First, Middle Initial)			Transaction ID: 3	3012001								
Coleman For Senate 08			Date of Disburser	nent								
Mailing Address 7300 Hudson Blvd Suite	270a		0.5	9 7 2007								
City St Paul	State Zip Code MN 55128		Amount of Each [	Disbursement this Period								
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9 🔛	ement For: 2008  ( Primary General Other (specify)	Туре										
Full Name (Last, First, Middle Initial) Coleman For Senate 08			Transaction ID: 3 Date of Disburser	ment								
Mailing Address 7300 Hudson Blvd Suite	270a		05 D29	9 2007								
City St Paul	State Zip Code MN 55128		Amount of Each [	Disbursement this Period								
Purpose of Disbursement Void - Norm Coleman for US Senate												
Candidate Name Sen. Norm Coleman		Category/ Type										
	ement For: 2008  Primary General Other (specify)		Void - Norm Co US Senate	leman for								
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١.	NAME OF COMI American Den	MITTEE (In Full) tal Political Action	Committe	e										
		First, Middle Initial) n For Congress						Date	saction ID of Disburs	ement		V	V	
	Mailing Address	1035 Dominion	Drive					0 <sup>M</sup> 5	M / D	3 0 /	Y	ž 0 ŏ	7 '	
	City Hanahan			State SC	Zip Code 29406			Amo	unt of Eacl	n Disbu	ırsem	ent this	Perio	od
	Purpose of Disbu Sent to Phil Latha					Г	011					1000.0	00	_
	Candidate Name Henry Brown						ategory/ Type							
	Office Sought: State: SC	X House Senate President District: 01		ment For: Primary Other (spe	2008 General			Sent	to Phil L	atham				
	Full Name (Last, Doggett for Co	First, Middle Initial)							saction ID of Disburs					
	Mailing Address P.O. Box 5843							0 <sup>M</sup> 5	M / D	3 0 /	Y	žoŏ	7 <sup>Y</sup>	
	City Austin			State TX	Zip Code 78703			Amo	unt of Eacl	n Disbu	ırsem	ent this	Perio	od
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	Candidate Name Lloyd Doggett					Ca	ategory/ Type							
	Office Sought: State: TX	X House Senate President District: 25		ment For: Primary Other (spe	2008 General			sent	to Alan N	<b>l</b> oore				
		First, Middle Initial) ongressional Com	mittee						saction ID					
	Mailing Address	P.O. Box 5417	5					0 <sup>M</sup> 5	M / D	3 0 /	Y	žoŏ	7 <sup>Y</sup>	
	City Lubbock			State TX	Zip Code 79453			Amo	unt of Eacl	n Disbu	ırsem	ent this	Perio	od
	Purpose of Disbu						011	l L.				1000.0	00	_
	Candidate Name Rep. Robert R. Neugebauer					Ca	ategory/ Type							
	Office Sought: State: TX	X House Senate President District: 19		ment For: Primary Other (spe	2008 General			sent	to Jay Ad	dkins				
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	)		FOR LINE NUMBER: PAGE (check only one)				39 / 4	40					
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American Dental Political Action Committee	ee													
Full Name (Last, First, Middle Initial)		Transaction ID: 3912879												
Coleman For Senate 08					Date of Disbursement									
Mailing Address 7300 Hudson Blvd Suite	270a				0 <sup>M</sup> 5	IVI	<u> </u>	3 0	J L	2	0 ŏ 7	7 '		
City St Paul	State Zip Code MN 55128				Amo	unt o	f Eacl	h Di	isburse	ement	this F	Period		
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Candidate Name Sen, Norm Coleman		ı	01 ateg	ory/										
	ement For: 2008		Тур	e 										
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Full Name (Last, First, Middle Initial)					1		-	_	91485	54				
Doggett for Congress					Date	of D	isburs			Y Y	Y	Υ		
Mailing Address P.O. Box 5843					0 5		´ L ;	3 1	J L	2	0 ŏ 7	7		
City Austin	State Zip Code TX 78703				Amount of Each Disbursement this						this F	Perio		
Purpose of Disbursement Void - Doggett for Congress			01	1							-2.0	0		
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State: TX District: 25  Full Name (Last, First, Middle Initial)					Trans	sact	ion ID	): 30	91485	55				
Doggett for Congress					Date	of D	isburs	sem	ent					
Mailing Address P.O. Box 5843					0 <sup>M</sup> 5	М	/ D	3 1		ž	0 ŏ 7	7 <sup>Y</sup>		
City Austin										ement	this F	Perio		
Purpose of Disbursement Sent to Alan Moore		01							20	0.00	0			
Candidate Name Lloyd Doggett			ateg Typ	ory/										
Office Sought: X House Disburse Senate X President	ement For: 2008 Primary General Other (specify)	<u> </u>	- 76	-	Sent	to A	Nan N	Mod	ore					
State: TX District: 25														
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